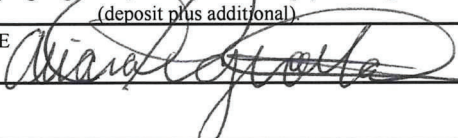


|  |   |   |                           |   |                             |
|--|---|---|---------------------------|---|-----------------------------|
| AO 435<br>(Rev. 04/18)   |   | ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS |                           | <b>FOR COURT USE ONLY</b>                             |                             |
| <b>TRANSCRIPT ORDER</b>  |   |   |                           | <b>DUE DATE:</b>                                      |                             |
| <i>Please Read Instructions:</i>   |   |   |                           |   |                             |
| 1. NAME<br><b>Ariana Pagnotta</b>  |   | 2. PHONE NUMBER<br><b>(914) 786-0011</b>          |                           | 3. DATE<br><b>3/31/2023</b>                           |                             |
| 4. DELIVERY ADDRESS OR EMAIL<br><b>ariana.pagnotta@davispolk.com</b>   |   | 5. CITY<br><b>New York</b>                        |                           | 6. STATE<br><b>NY</b>                                 | 7. ZIP CODE<br><b>10017</b> |
| 8. CASE NUMBER<br><b>23-09001</b>  | 9. JUDGE<br><b>Judge David R Jones</b>                                  | DATES OF PROCEEDINGS                              |                           |   |                             |
|  |   | 10. FROM <b>3/28/2023</b>                         |                           | 11. TO <b>3/28/2023</b>                               |                             |
| 12. CASE NAME<br><b>Serta Simmons Bedding, LLC v. AG Centre Street Partner</b>                                 |   | LOCATION OF PROCEEDINGS                           |                           |   |                             |
|  |   | 13. CITY <b>Houston</b>                           |                           | 14. STATE <b>Texas</b>                                |                             |
| 15. ORDER FOR  |   |   |                           |   |                             |
| <input type="checkbox"/> APPEAL  |   | <input type="checkbox"/> CRIMINAL                 |                           | <input type="checkbox"/> CRIMINAL JUSTICE ACT         |                             |
| <input type="checkbox"/> NON-APPEAL  |   | <input type="checkbox"/> CIVIL                    |                           | <input checked="" type="checkbox"/> BANKRUPTCY        |                             |
|  |   | <input type="checkbox"/> IN FORMA PAUPERIS        |                           | <input type="checkbox"/> OTHER                        |                             |
| 16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)   |   |   |                           |   |                             |
| PORTIONS   |   | DATE(S)   |                           | PORTION(S)  |                             |
| <input type="checkbox"/> VOIR DIRE   |   |   |                           | <input type="checkbox"/> TESTIMONY (Specify Witness)  |                             |
| <input type="checkbox"/> OPENING STATEMENT (Plaintiff)   |   |   |                           |   |                             |
| <input type="checkbox"/> OPENING STATEMENT (Defendant)   |   |   |                           |   |                             |
| <input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)  |   |   |                           | <input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy) |                             |
| <input type="checkbox"/> CLOSING ARGUMENT (Defendant)  |   |   |                           |   |                             |
| <input type="checkbox"/> OPINION OF COURT  |   |   |                           |   |                             |
| <input type="checkbox"/> JURY INSTRUCTIONS   |   |   |                           | <input checked="" type="checkbox"/> OTHER (Specify)   |                             |
| <input type="checkbox"/> SENTENCING  |   |   |                           | <b>Entire Hearing</b>                                 |                             |
| <input type="checkbox"/> BAIL HEARING  |   |   |                           |   |                             |
| 17. ORDER  |   |   |                           |   |                             |
| CATEGORY   | ORIGINAL<br>(Includes Certified Copy to Clerk for Records of the Court) | FIRST COPY  | ADDITIONAL COPIES         | NO. OF PAGES ESTIMATE                                 | COSTS                       |
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| REALTIME   | <input type="checkbox"/>  | <input type="checkbox"/>                          |                           |   |                             |
| CERTIFICATION (18. & 19.)<br>By signing below, I certify that I will pay all charges (deposit plus additional) |   |   |                           | ESTIMATE TOTAL  | <b>0.00</b>                 |
| 18. SIGNATURE               |   |   |                           | PROCESSED BY  |                             |
| 19. DATE<br><b>3/31/2023</b>   |   |   |                           | PHONE NUMBER  |                             |
| TRANSCRIPT TO BE PREPARED BY<br><b>Veritext Legal Solutions</b>  |   |   |                           | COURT ADDRESS   |                             |
| ORDER RECEIVED   |   | DATE  | BY                        |   |                             |
| DEPOSIT PAID   |   |   |                           | DEPOSIT PAID  |                             |
| TRANSCRIPT ORDERED   |   |   |                           | TOTAL CHARGES   | <b>0.00</b>                 |
| TRANSCRIPT RECEIVED  |   |   |                           | LESS DEPOSIT  | <b>0.00</b>                 |
| ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT  |   |   |                           | TOTAL REFUNDED  |                             |
| PARTY RECEIVED TRANSCRIPT  |   |   |                           | TOTAL DUE   | <b>0.00</b>                 |